RECEIVED

STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre. SD 57501-5077 SD Secretary of State

1. TITLE OF NEWSPAPER 10 O C ())	2. DATE (2) 1 -
3. FREQUENCY OF ISSUE 3A, NO. OF ISSUES PUBLIS	bess	712612023
Weekler 52	50- PRICE & SOCO	
4. COMPLETE MAYLING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street City County State and ZIP) 4.5. 1.		
16E He five Red Field SD 57476 Smink		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers)		
16 to the Kertild SO 57476		
6. FULL NAME OF PUBLISHER: Mach E Davis		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given. COMPLETE MAILING ADDRESS COMPLETE MAILING ADDRESS		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING I 600		
state. If more space is needed, list on back of this form.		
O EVERYT AND MATTERS OF OR ONE	AVERAGE NO. COPIES EACH	ACTUAL NO. COPIES
9. EXTENT AND NATURE OF CIRCULATION	ISSUED PRECEDING 12	ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	MONTHS 1061	1972
B.PAID AND/OR REQUESTED CIRCULATION Sales through dealers and carriers, street vendors, and counter sales.	449	450
2. Mail Subscription (Paid and an appropriate)	99/0	9711
(Paid and or requested) 3. Paid Electronic Copies	130	179
26 14	109	111
C.TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	1554	1525
D.FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	82	82
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	D	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	1636	16/7
F. COPIES NOT DISTRIBUTED	200	755
Office use, left over, unaccounted, spoiled after printing	322	322
2. Return from News Agents	<i>D</i>	0
G.TOTAL (Sum of E, F1 and F2 - Should equal total shown in A.)	1991	1972
Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public I swear that the statements made by me are true, correct, and complete:		
(Signature)	(Tublisher Title)
State of South Dakota Swom to before me this 29 day of Sept , 2023		
County of Beach Notary Public		
County of Beacle (Seal) Notary Public My commission expires: 04-26-2038 Form: SOS REC 051 9/2016		
Form: SOS REC 051 9/2016		